

A.A.C. R9-25-509, As Adopted Effective June 8, 2005

R9-25-509. Protocol for EMT-B Administration of Epinephrine by Auto-injector (A.R.S. §§ 36-2202, 36-2204, 36-2205, and 36-2209)

- A.** For an EMT-B, the ability to administer epinephrine by auto-injector is an optional skill attained by completing training for the administration of epinephrine by auto-injector as prescribed in this Section.
- B.** The administration of epinephrine by auto-injector is not an advanced procedure that requires an EMT-B to have administrative medical direction and on-line medical direction.
- C.** An EMT-B shall not administer epinephrine by auto-injector until the EMT-B has completed training that:
 - 1. Includes at least two clock hours covering:
 - a. The requirements of this Section;
 - b. The epidemiology and physiology of anaphylaxis and allergic reaction;
 - c. The common methods of entry of substances into the body;
 - d. The common antigens most frequently associated with anaphylaxis;
 - e. The physical examination of patients with complaints associated with anaphylaxis or allergic reaction;
 - f. The signs and symptoms of anaphylaxis, allergic reaction, and respiratory distress associated with anaphylaxis;
 - g. Differentiating between anaphylaxis and other medical conditions that may mimic anaphylaxis;
 - h. The following information about epinephrine by auto-injector:
 - i. Class,
 - ii. Mechanism of action,
 - iii. Indications and field use,
 - iv. Contraindications,
 - v. Adverse reactions,
 - vi. Incompatibilities and drug interactions,
 - vii. Adult dosage,
 - viii. Pediatric dosage,
 - ix. Route of administration,
 - x. Onset of action,
 - xi. Peak effects,

- xii. Duration of action,
 - xiii. Dosage forms and packaging,
 - xiv. Recommended Arizona drug box minimum supply, and
 - xv. Special considerations;
 - i. The proper storage of an epinephrine auto-injector;
 - j. Medical asepsis;
 - k. The use of standard precautions, as defined in A.A.C. R9-6-101, and body substance isolation procedures when administering a medication by injection;
 - l. The proper disposal of contaminated objects and sharps; and
 - m. Documenting the administration of epinephrine by auto-injector;
 - 2. Includes pre-training and post-training written evaluations and a practical skills evaluation to ensure that the EMT-B demonstrates competency in the subject matter listed in subsection (C)(1); and
 - 3. Is approved by the EMT-B's administrative medical director or, if the EMT-B does not have an administrative medical director, by the emergency medical services provider for which the EMT-B works.
- D.** An EMT-B who has completed initial training as described in subsection (C) and who desires to maintain authorization to administer epinephrine by auto-injector shall complete refresher training that complies with subsection (C) at least once every 24 months after completing the initial training.